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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/599,899
Filing Date	October 12, 2006
First Named Inventor	Michael P. Burns
Title	STEREOSELECTIVE BIOCONVERSION OF ALIPHATIC DINITRILES INTO CYANO CARBOXYLIC ACIDS
Art Unit	
Examiner Name	
Attorney Docket Number	PC26182A

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number: 28880

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

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<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax	734-622-2928	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Michael P. Burns</i>	Date	<i>February 7, 2007</i>
Name	Michael P. Burns	Telephone	860-441-7392
Title and Company	Senior Scientist, Pfizer Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**.

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Telephone

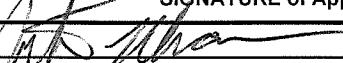
Fax 734-622-2928

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	7-16-07
Name	Justin K. Weaver	Telephone	616 688 7460
Title and Company	Quality Engineer, Perrigo Company		

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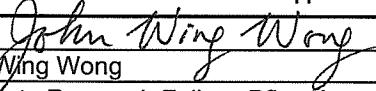
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SIGNATURE of Applicant or Assignee of Record

Signature		Date	Feb 7, 2007
Name	John Wing Wong	Telephone	860-441-6882
Title and Company	Associate Research Fellow, Pfizer Inc.		

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